**West Midlands Care Act Compliance Audit for Safeguarding Adult Boards**

**Introduction**

The Statutory Guidance issued to support the Care Act 2014 states “Each SAB should…determine its arrangements for peer review and self-audit.”

The aim of this audit tool is to help members of Safeguarding Adult Boards audit their safeguarding arrangements using a common framework which has been developed for use by a wide range of organisations from varying perspectives, and to improve and strengthen arrangements for safeguarding adults with care and support needs. An open and honest approach is encouraged to enable organisations to get maximum benefit from the process.

The purpose of the tool is to provide SABs with an overview of the Safeguarding Adult arrangements that are in place within partner agencies identifying:

* Strengths, in order that good practice can be shared
* Common areas for improvement where organisations can work together with support from the SAB
* Single agency issues that need to be addressed
* Partnership issues that may need to be addressed by the SAB
* Issues that need to inform the Board’s Strategic Plan

**Completing the self-assessment audit**

This self-assessment audit tool should be completed by all partner agencies represented on the SAB.

Organisations are required to make a judgement as to how well each question is being achieved based on the following ratings:

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| **Outstanding** | **Your organisation can demonstrate that it meets the requirement consistently across the organisation.** |
| **Good** | **Your organisation can demonstrate that it meets most of the requirement; there may be pockets of excellence but there may also be areas for improvement.** |
| **Requirements Improvement** | **Your organisation is not able to demonstrate that it has a consistent approach that assures people's safety, health or wellbeing are protected. Therefore there is an increased risk that people could be harmed or there is limited assurance about safety.** |
| **Inadequate** | **Your organisation does not meet this requirement – therefore people are not safe.** |
| **N/A** | **The requirement is not applicable to your organisation.** |

Areas with an INADEQUATE or REQUIRES IMPROVEMENT rating must be supported by a SMART (specific, measurable, achievable, realistic, timely) action to be taken to ensure improvement. The actions should have both ‘by whom’ and ‘completion date’ specified.

Examples of evidence that might be provided have been given – however these are not exhaustive and not all suggestions will be relevant for all organisations*.* The purpose of providing evidence is for the organisation to draw together relevant information for its own assurance.

It is recommended a lead officer is identified for the organisation to coordinate the self-assessment. Organisations with a number of different departments should ask each department to complete the self-assessment for their department. The lead officer should then collate the outcomes and the lead officer with representatives from each department should agree an overall rating for the whole organisation. For each requirement the following should be identified:

* What have you found that is good about your organisation’s approach to Safeguarding Adults that you could share across your organisation and with partners?
* What have you found that gives you cause for concern - including evidence from Safeguarding Adult Reviews (SAR), provider level concerns, serious incident investigation or other reviews, as appropriate?

Your self-assessment should be a realistic, proportionate working document for improvement. You must also consider your own internal governance arrangements – who is going to monitor improvement and feedback to your SAB?

**ORGANISATIONS INFORMATION**

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| **ORGANISATION** |  | | |
| **Executive Lead responsible**  **for safeguarding adults:** | Name | Designation: | |
| Tel no: | Email: | |
| **Name of person completing**  **this audit:** | Name | Designation: | |
| Tel no: | Email: | |
| **Name of person authorising**  **this audit:** | Name | Designation: | |
| Tel no: | Email: | |
| **Date audit completed/reviewed:** |  | **Date audit authorised:** |  |

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| --- | --- | --- | --- |
| **Action Plan** | | | |
| **Action** | **Lead** | **Timescale** | **Monitoring/reporting arrangements** |
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| **Section 1 - LEADERSHIP, STRATEGY, GOVERNANCE, ORGANISATIONAL CULTURE** | | | | | | |
| **1** | **Discussion points/comments** | **Rating** | **Evidence to support rating** | | **Progress or date completed** | |
| **1.1** | Does your organisation have a senior staff member that has the responsibility to lead and promote a safeguarding culture throughout the organisation? | Choose an item. | *Please name the individual and their post title(s) and briefly describe their role and responsibilities. For example: training, professional advice to senior manager, monitoring of complex cases, support to staff etc.* | |  | |
| **1.2** | Does your organisation recognise and act upon its responsibilities to the Board and engage with the Board and safeguarding partners to support the SAB achieve its aims and priorities? | Choose an item. | *Board and subcommittee membership, participation.*  *How attendance and participation monitored and information and actions from meetings is bought back into the organisation.*  *Attendance at SAB development and training opportunities*  *How do the priorities of the SABinfluence/inform your organisations priorities?* | |  | |
| **1.3** | How robust are your governance arrangements for safeguarding adults across the organisation? | Choose an item. | *For example is there a steering group, operational group, corporate management group?* | |  | |
| **1.4** | How well does your organisation make it known that adult safeguarding is core business and that all safeguarding activity is in line with Making Safeguarding Personal? | Choose an item. | *Is MSP incorporated in strategies and polices. Clear pathways for raising concerns. Positive risk taking approach.* | |  | |
| **1.5** | Is your organisation compliant with the safeguarding sections of the Care Act 2014 (Sections 42 – 46 and Schedule 2) and Chapter 14 of the Statutory Guidance issued under the Care Act 2014? | Choose an item. | *Please provide at least two examples*  [*http://www.legislation.gov.uk/ukpga/2014/23/section/42/enacted*](http://www.legislation.gov.uk/ukpga/2014/23/section/42/enacted)  [*http://www.legislation.gov.uk/ukpga/2014/23/schedule/2/paragraph/3/enacted*](http://www.legislation.gov.uk/ukpga/2014/23/schedule/2/paragraph/3/enacted)  [*https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance*](https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance) | |  | |
| **1.6** | Does your organisation have a process for identifying and referring for a Safeguarding Adult Review? | Choose an item. | *Please describe and provide copies/a link to a relevant document* | |  | |
| **1.7** | Is a learning culture evident? Does your organisation learn from good practice and from things that don’t go well? Are Safeguarding Adult Reviews used as the basis of improvement for the future? | Choose an item. | *Describe and provide specific examples* | |  | |
| **Section 2 - POLICIES, PROCEDURES AND PROTOCOLS** | | | | | | |
| **2** | **Discussion points/comments** | **Rating** | **Evidence to support rating** | **Progress or date completed** | | |
| **2.1** | Does your organisation have the following policies, procedures, and protocols: | Choose an item. |  |  | | |
| * Safeguarding Adults? | Choose an item. | *Is it compliant with the Care Act 2014 and the Adult Safeguarding- multi-agency policy and procedures for the protection of adults with care and support needs in the West Midlands?* |  | | |
| * Whistleblowing? | Choose an item. | *How are staff who whistle blow enabled to do so and protected?* |  | | |
| * Position of Trust procedures? | Choose an item. | *Please describe how this policy, procedure, protocol is implemented?* |  | | |
| * Management of allegations against staff? | Choose an item. | *Please describe how this policy, procedure, protocol is implemented?* |  | | |
| * Complaints? | Choose an item. | *How are safeguarding concerns identified from complaints?*  *Is there a complaints policy available and easy to understand for all staff, volunteers and service users?*  *Does practice/policy change as a result of an upheld complaint?* |  | | |
| * Staff supervision? | Choose an item. | *Can you evidence that your agency is compliance with your policy?* |  | | |
| * Information sharing? | Choose an item. |  |  | | |
| * Working with people who disengage/refuse services? | Choose an item. |  |  | | |
| * MCA/DoLS including Best Interest and consent? | Choose an item. |  |  | | |
| * Prevent? | Choose an item. |  |  | | |
| * Positive risk management? | Choose an item. |  |  | | |
|  | * Domestic abuse? | Choose an item. |  |  | | |
|  | * Advocacy? | Choose an item. |  |  | | |
|  | * Dispute Resolution/Escalation? | Choose an item. |  |  | | |
| **2.2** | How can staff access to policies, procedures, protocols? | Choose an item. | *Prompt – what about staff who don’t work traditional office hours, or do not have a designated office base?* |  | | |
| **2.3** | How do you know that staff are aware of and compliant with your organisations policies, procedures, protocols? | Choose an item. |  |  | | |
| **2.4** | What is the organisation’s policies/procedures/protocols review schedule? | Choose an item. | *Please state frequency, how they are monitored and how policies, procedures and protocols are agreed by the organisation. It is good practice for all policies and procedures to be reviewed on an annual basis?* |  | | |
| **Section 3 – COMMISSIONING** | | | | | |  |
| **3** | **Discussion points/comments** | **Rating** | **Evidence to support rating** | **Progress or date completed** | |  |
| **3.1** | Is safeguarding an integral part of the procurement and tendering process regardless of level of contact with adults with care and support needs? | Choose an item. | *Please describe.* |  | |  |
| **3.2** | Is safeguarding an integral part of all contracts issued? Are there explicit clauses that hold suppliers/providers to account for preventing and dealing promptly and appropriately with abuse and neglect? | Choose an item. | *Please describe.* |  | |  |
| **3.3** | Where services are sub-commissioned, do the organisation’s agreements reflect the requirement between commissioners and providers to have regard to the need to safeguard and promote the wellbeing of people who use services? | Choose an item. | *Please describe.* |  | |  |
| **3.4** | How is adherence to the safeguarding requirements in contracts monitored and managed?  What actions are available if suppliers/providers fall short of the contract requirements or there is a breach? | Choose an item. | *Please describe.* |  | |  |
| **Section 4 - HUMAN RESOURCES AND WORKFORCE** | | | | | |  |
| **4** | **Discussion points/comments** | **Rating** | **Evidence to support rating** | **Progress or date completed** | |  |
| **4.1** | Does your recruitment policy and procedure follow safer recruitment principles? | Choose an item. | *Prompt:* the policy and procedure includes:  Requirement to ascertain references  Process for ascertaining DBS checks  Procedures for checking professional registrations |  | |  |
| **4.2** | How does your organisation ensure that new staff and volunteers are made aware of their responsibilities to safeguard adults with care and support needs and promote wellbeing? | Choose an item. | *Please describe.* |  | |  |
| **4.3** | Is safeguarding adults awareness training delivered to all staff and volunteers, and opportunities available to maintain competence and develop enhanced skills for those with specific roles and responsibilities? | Choose an item. | *Please describe All staff who may come into contact with Adults with Care and Support needs should, as a minimum, receive Basic Safeguarding Awareness Training from their organisation?* |  | |  |
| **4.4** | Do all staff and volunteers have access to regular supervision/1-1 support that allows them to reflect on their practice? | Choose an item. | *Please describe* |  | |  |
| **4.5** | How confident are you that your staff are enabled and supported to comply with local policies and procedures? | Choose an item. |  |  | |  |
| **Section 5 - QUALITY, ASSURANCE AND MONITORING** | | | | | |  |
| **5** | **Discussion points/comments** | **Rating** | **Evidence to support rating** | **Progress or date completed** | |  |
| **5.1** | Does your organisation have a Quality Assurance Framework for Safeguarding Adults? | Choose an item. | *Please describe Quality Assurance may include the auditing of case files/observation of practice/collation of data/service user feedback* |  | |  |
| **5.2** | How do you know that your Quality Assurance Framework positively influences practice to safeguard adults? | Choose an item. | *Please give at least one example.* |  | |  |
| **5.3** | Are all staff aware of their personal responsibility to report concerns and to ensure that poor practice is identified and tackled? | Choose an item. | *Please describe* |  | |  |
| **5.4** | Are there clear and accessible systems for staff/volunteers/trustees’ voices to be heard and influence change? | Choose an item. | *Prompt: how are Whistleblowers supported and protected?* |  | |  |
| **5.5** | How does your organisation implement the learning from local and national Serious Adult Reviews, Child Safeguarding Practice Reviews[[1]](#footnote-1) and Domestic Homicide Reviews to drive improvement? | Choose an item. | *Please give at least one example.* |  | |  |
| **Section 6 – Making Safeguarding Personal** | | | | | |  |
| **6** | **Discussion points/comments** | **Rating** | **Evidence to support rating** | **Progress or date completed** | |  |
| **6.1** | How well is the Making Safeguarding Personal approach embedded into all your organisation’s safeguarding practices? | Choose an item. | *Prompts: does the organisation operate a person-led, outcome-focused approach?* |  | |  |
| **6.2** | Does your organisation provide information and advice in a format accessible to the individuals so they can be in control and be empowered? | Choose an item. | *Please describe what written information is available and the range of formats available – e.g. different languages, easy read, audio etc. and give at least one example.* |  | |  |
| **6.3** | How well does your organisation meet the Care Act 2014 Section 68 duty for an individual to have access to an independent advocate where they have substantial difficulty in being involved in the safeguarding process and have no suitable representation or support? | Choose an item. | *Please describe process and give one example.*  <http://www.legislation.gov.uk/ukpga/2014/23/section/68/enacted> |  | |  |
| **6.4** | Are there clear and accessible systems for staff/volunteers/trustees’ voices to be heard and influence change? | Choose an item. | *Prompt: how are complainants supported and protected?* |  | |  |
| **6.5** | How does your organisation have assurance that it has a thorough understanding of diversity and responds to individual needs in an effective and sensitive manner? | Choose an item. | *For example – Only female workers would respond to FGM*  *Please give 2 examples.* |  | |  |
| **6.6** | Is there confidence in your organisation that good quality information/record keeping is readily accessible and shared appropriately to ensure that there can be effective multi-agency interventions that prevent people repeating their story? | Choose an item. | *Prompt – MECC – Make Every Contact Count, three Conversations model etc.* |  | |  |

1. Child Safeguarding Practice Reviews replace Serious Case Reviews as per Working Together 2018 [↑](#footnote-ref-1)